

PROCEEDINGS OF THE BROWN COUNTY HUMAN SERVICES BOARD

Pursuant to Section 19.84 Wis. Stats, a regular meeting of the **Brown County Human Services Board** was held on Thursday, April 10, 2014 in Board Room A of the Sophie Beaumont Building – 111 North Jefferson Street, Green Bay, WI

Present: Chairman Tom Lund
Susan Hyland, Helen Smits, Carole Andrews, Paula Laundrie, Bill Clancy, John Van Dyck

Excused: Craig Huxford, JoAnn Graschberger

Also

Present: Jeremy Kral, Executive Director
Nancy Fennema, Director of Community Programs
Tim Schmitt, Finance Manager
Dani Young, Project Manager

1. Call Meeting to Order:

The meeting was called to order by Chair Tom Lund at 5:15 pm.

2. Approve/Modify Agenda:

ANDREWS/LAUNDRIE moved to approve the agenda.
The motion was passed unanimously.

3. Approve Minutes of January 9, 2014 & March 13, 2014 Human Services Board Meetings:

HYLAND/ANDREWS moved to approve the minutes dated January 9, 2014 and March 13, 2014.
The motion was passed unanimously.

4. Executive Director's Report

Executive Director Jeremy Kral presented and handed a written report to the board (attached).

Citizen Board Member Andrews gave an update on Family Care, as she sits on the board of directors for the N.E.W. Family Care District. They have decided to work with the Lakeland Care District to become a larger district. Meetings occurring with both boards have proven that both want good quality services for people in the district.

Q: Citizen Board Member Laundrie stated that Family Care used to have a lot of momentum but that seems to have declined.

A: Lund stated that some of the districts didn't receive the anticipated return savings. Andrews stated that Northern Bridges was the first district to go forward without a pilot and had numerous issues. Decision makers want to fix existing problems before rolling out Family Care to additional districts.

Citizen Board Member Andrews stated that they cannot use planning grant money to respond to the RFP and funding will cease once the RFP is active.

Chairman Lund stated that eventually, citizens could come forward and challenge the state in regards to the inequality of care, possibly basing a law suit on equal protection grounds.

Q: County Board Member Clancy asked how much time, effort & money has gone into the N.E.W. Family Care District planning.

A: Chairman Lund stated that Rolf (Hanson) has been with the district for more than 4 years and there was an elected official planning group before that. He states he remembers the Board hearing about this for at least 8 years.

Kral added that the Lakeland MCO does have one of the pilot counties and institutional knowledge since they began operating Family Care in 2001.

LAUNDRIE/CLANCY moved to receive and place on file.
Motion was carried unanimously.

5. Electronic Medical Records Update.

- Dani Young introduced herself and gave a handout to the group (attached).
- We are working on replacing the current authorization & billing system in the Community Programs & Business Operations areas. Currently, we are in the middle of evaluating each unit's needs and will turn that into requirements for new systems. It is important that we can share information easily across units.
- One of the main focuses is optimization – utilizing systems to their full potential and making forms electronic. We are looking at improving billing processes to collect more revenue.
- One of the goals is to facilitate more streamlined documentation. Sometimes with electronic systems, people assume the system is used to collect information. It is not designed for us to be able to collect data but, instead, to facilitate people's daily work and to make things easier. The less time staff spend on paperwork is the more time they spend serving their clients.

County Board Member Van Dyck stated that when looking at the replacement of the AS400, he would encourage us to take advantage of the potential of the internet. He was disappointed when the county payroll system was implemented. He stated sometimes the county is archaic when it comes to programs and he would like us to be aware of that and realize the potential out there. Young stated that we do want a modern system but we also want it agile enough for people who aren't as computer literate but are highly knowledgeable in their roles.

Q: County Board Member Clancy asked how far along we are on the project.

A: Young stated we are in the initial phase and just met with the project team a few weeks ago. At this point, we are just evaluating the work of the different units. There will be a lot of reviewing of processes. She cited her experience with EPIC in her previous roles.

Q: Citizen Board Member Landrie asked how Avatar compares to EPIC.

A: Young stated Avatar is specifically for Behavioral Health, while EPIC is designed for big hospital systems.

HYLAND/VAN DYCK moved to receive and place on file.
Motion was carried unanimously.

6. Financial Report

Schmitt had submitted a written report with the board packet agenda.

Kral added that the department experienced a favorable budget variance of less than 1%. For 2013, we drew 1.2 million dollars from the fund balance which was favorable by 1 million versus what was budgeted. He also stated that it is anticipated the CTC will function more efficiently on the expense side of the ledger this year. Revenue is tough to predict since the crisis diversion facility is newly opened. Our new CTC Administrator is doing some refinement to keep expenses down. We are trying to budget as accurately as possible.

County Board Member Van Dyck stated that during budget time, he would emphasize the \$700,000 utilization of fund balance rather than the favorable budget variance.

LAUNDRIE/ANDREWS moved to receive and place on file.
Motion was carried unanimously.

7. Statistical Reports:

Please refer to the packet which includes this information.

8. Approval for New Non-Continuous Vendor:

Please refer to the packet which includes this information.

9. Request for New Vendor Contract:

Please refer to the packet which includes this information.

10. Other Matters:

Next Meeting: Thursday, May 8, 2014
5:15 p.m. – Sophie Beaumont Building, Board Room A

11. Adjourn Business Meeting:

ANDREWS/HYLAND moved to adjourn; motion passed unanimously. Chairman Lund adjourned the meeting at 5:59 p.m.

Respectfully Submitted,

Kara Navin
Recording Secretary

Brown County Human Services

Executive Director's Report to the Human Services Board

April 10, 2014

Members of the Board:

The Business Unit just completed a very busy time of year. Closing the books for a department that receives over \$80 million in revenue from 3rd parties including federal and state government, several private insurance companies, and private payers is a very significant workload as you would expect. Further details are included in the financial reports.

The Electronic Medical Record project has been making good progress recently. We recently converted from Avatar to MyAvatar, a newer product from our vendor, Netsmart. This change has received universally positive feedback from the people who interact with it, which includes many social workers, case managers, physicians, billing personnel and associated supportive roles.

We are preparing to move into "Phase 3" of the Electronic Medical Record project, which basically means replacing our current authorization system. The authorization system basically tracks approvals and payments for services for most of the clients of the department. The current authorization system is based on software that is many years old, has many customized components without documentation, and generally requires a great deal of maintenance while simultaneously being byzantine and intimidating to users. Further updates will be provided by Dani Young in a few moments.

In the area of children and family services, Manager Jim Hermans and Child and Adolescent Behavioral Health Unit supervisor Dr. Althea Noukki have developed a proposal to bring state funding for Coordinated Services Team Initiative back to Brown County. The proposal for this recurring funding stream would fund a new position which will provide education, training, support, recruitment, and facilitation skills to our collaborating partners in schools and other professional systems that care for youth with behavioral health needs. The CSTI model fits best for children and families who have needs that are too great to be met by traditional outpatient counseling. We are very excited that our state partners chose to reinvest in this area.

Supervisor Pat Evans and co-chair Sue Lockwood reconvened the Child Abuse and Neglect Task Force for a second summit on March 21. At that meeting, there were several presentations, and the community plan was revealed. The Human Services Department has been an enthusiastic partner in the task force, and on behalf of the department I would like to recognize the efforts to date of the many task force member agencies and of our own personnel as well as Supervisor Evans.

Legislative developments in this area include the passage of AB570, which permits a child placed in out-of-home care who is a full-time student has an IEP to remain in care until earning their diploma, HSED, or reaching age 21-whichever comes first. This bill is expected to have a positive impact on affected youth. Based on county input, the legislation was changed so the state has the financial responsibility for youth over age 18 in expensive Residential Care Center (RCC) placements. Also, AB487 which sought to return non-violent 17 year-old offenders to juvenile court was not passed. The Wisconsin County Human Services Association advocated against passage because of the financial implications of shifting the cost of providing services from state to counties and I personally testified against the bill at a hearing in Madison for that reason.

In internal child welfare news, Jim Hermans has announced his retirement effective in May this year. We thank Jim copiously for his contributions to this department and the community and wish him all the best in his future endeavors.

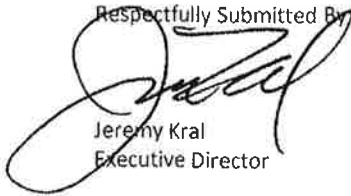
Our consistently award-winning Economic Support Unit has been a statewide leader through the historic changes in the health insurance realm as implementation of the Patient Protection and Affordable Care Act. Workloads have increased greatly, and callers have often needed extra support due to confusion, frustration, and misunderstanding due to the changes. ES Administrator Jenny Hoffman and the entire team in Economic Support deserve recognition for the efficient and high-quality services they provide the community.

There has been no announcement or public information about the prospects of Family Care. Expansion of Family Care still appears to have support among state leaders, but there has been no official action toward expanding in our area. We hope to have better indication of the state's direction in the coming weeks and months.

There has been a significant development in our local Family Care planning district. The boards of NEW Family Care and Lakeland Care District have each passed motions which support a joint proposal to serve our 7-county region if and when the state Department of Health Services releases an RFP. Each entity finds benefit in combining efforts to respond to the RFP and thus to serve our region collaboratively if the RFP is selected by the state. Lakeland would go from being a small MCO to one of the largest, and the NEW District gains enhanced likelihood of successful RFP and the practice knowledge of an MCO that began in one of the pilot counties February 1, 2001.

As you may recall, the state's biennial budget created the opportunity to access community mental health services through the Comprehensive Community Services (CCS) program at state and federal expense if counties are participating in an approved consortium. We have been working with our colleagues in Outagamie, Winnebago, Calumet, and Manitowoc counties to this end. The consortium model that we are working with will help create efficiencies from the perspective of both the state and counties by consolidating and streamlining non-value added activities such as establishing rates. The application for approval is in progress, and implementation will begin July 1 if all goes well.

Respectfully Submitted By

A large, stylized handwritten signature in black ink, appearing to read 'J. Kral', is written over the typed name and title.

Jeremy Kral
Executive Director



Electronic Medical Records Update

Projects

- Human Services – Community Programs and Business Operations
- Human Services – Community Treatment Center
- Human Services – Community Treatment Center Billing

Systems

- AS400
- Avatar
- ADL

Goals

- Facilitate more complete documentation
- Allow exchange of data with other departments
- Better reporting and follow-up
- Reduce staff administrative time

Staff Administrative Time Reduction Example

- One of the optimization items being considered at the CTC will result in a reduction in the amount of time staff has to spend documenting - filling out forms, taking notes, and/or entering state or federal required information (that is, away from patient care). This is what we've estimated the time savings will be for each role:

Role	Time Savings (Per Month)	Time Savings (Per Day)
HIM	16.00	0.53
Manager	40.00	1.33
MD	15.00	0.50
MDS RN	5.00	0.17
RN	164.95	5.50